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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 10/717,906 **TRANSMITTAL** Filing Date November 21, 2003 **FORM** First Named Inventor Hye Yong PARK et al. Art Unit 3637 (to be used for all correspondence after initial filing) **Examiner Name** N.C. Hawk Attorney Docket Number 9988.082.00 Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)						
X Fee Transmittal Form		Drawing(s)	After Allowance Communication to Group			
X Fee Attached		Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences			
X Amendment/Reply		Petition	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final		Petition to Convert to a Provisional Application	Proprietary Information			
Affidavits/declaration	n(s)	Power of Attorney, Revocation Change of Correspondence Addre	Status Letter			
X Extension of Time Request		Terminal Disclaimer		Other Enclosure(s) (please identify below):		
Express Abandonment R	equest	Request for Refund		* Application Data Sheet		
Information Disclosure Statement		CD, Number of CD(s)	_			
Certified Copy of Priority Document(s)						
Response to Missing Par Incomplete Application	ts/	Remarks				
Response to Missir	g Parts					
under 37 CFR 1.52	or 1.53					
	SIGNATURE	OF APPLICANT, ATTORNEY	, OR	AGENT		
	Mark R. Kresloff, Reg. No. 42,766 MCKENNA LONG & ALDRIDGE LLP					
Signature	Rg N. 43, 724 Yung Cu.1					
Date March 2, 2						

PTO/SB/17 (12-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE uired to respond to a collection of information unless it displays a valid OMB control

number

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Effective on 12/08/2004 Complete if Known Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/717,906 FEE TRANSMITTAL November 21, 2003 Filing Date Hye Yong PARK et al. First Named Inventor **FOR FY 2005** Examiner Name N.C. Hawk Art Unit 3637 ☐ Applicant claims small entity status. See 37 CFR 1.27 AMOUNT OF PAYMENT Attorney Docket No 9988 082 00

TOTAL AMOUNT OF PA	TIVIEN (\$)		Attorney Do	CKELINO.	9900.002.00	,	
METHOD OF PAYMENT (check all that apply)								
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): ☐ Deposit Account ☐ Deposit Account Number 50-0911 ☐ Deposit Account Name: ☐ For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee ☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments ☐ Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEAR	FILING		SEARCH	FEES Small Entity		TION FEES Small Entity		
Application Type	<u>Fee (\$)</u>	Fee (\$)	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	Fee (\$)		Fees Paid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee Paid (\$) Fee Paid (\$)								25 100 180 <u>s</u>
HP = highest number of total				<u>-</u>				
	Extra Claims	Fee (\$)	Fee Pai	* ' '				
3 -3 or HP = 0 x \$200 = \$0 HP = highest number of independent claims paid for, if greater than 3								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee(\$) Fee Paid (\$)								
- 100 = / 50 = (round up to a whole number) x 4. OTHER FEE(S) Other: Petition for Extension of Time (One Month) Other:						=	Fee Pai \$120.00	
	-							

SUBMITTED BY)	/		
Signature		\sim	Y-mg cuci	Registration No. (Attorney/Agent)	Telephone (202) 496-7513
Name (Print/Type)	Mark R. Kresloff	///	My m 43, 324	42,766	Date March 2, 2006

This collection of information is required by 3 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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